

# Wellbeing initiatives: all things ‘Great-ix’

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## Introduction

It is becoming an increasingly common phenomenon for junior doctors to develop poor morale within the workplace. The Academy of Medical Royal Colleges reviewed the reasons for this, which included working in an organisation that is riddled with a blame culture, and working in fear of litigative circumstances.<sup>1</sup> The ‘Health for Health Professionals’ (HHP) group is a confidential counselling service available for all doctors in Wales; statistics have shown a sharp rise in the number of self-referrals, with 160 documented between January 2018 and June 2019.<sup>2</sup>

As part of my role as a chief registrar, I have been keen to set up more robust wellbeing initiatives to help junior doctors feel valued and supported while working at Aneurin Bevan University Health Board.

## Materials and methods

Baseline data were collected regarding junior doctors’ experiences of wellbeing initiatives currently available within the health board or regionally. Subsequently, I aimed to set up several projects locally within the health board, as well as working with HHP Wales to further promote their counselling services to junior doctors. Three main projects have since been initiated and are currently in development:

- > Trainee committee meetings – as the Welsh equivalent to junior doctor forums these have been set up with a monthly committee meeting on each hospital site.
- > Schwartz rounds – these forums allow staff to discuss the emotional challenges and rewards from working within a highly pressured healthcare system.<sup>3</sup>
- > Great-ix implementation – research from the ‘Learning From Excellence’ foundation has shown that reporting positive outcomes, as a Safety II concept, can help improve morale and resilience within a healthcare organisation.<sup>4</sup>

## Results and discussion

Of those surveyed, only 23% were aware of current support services on offer and over 70% of junior doctors felt they would benefit from having access to wellbeing initiatives locally.

The trainee committee meetings are now in their third month, attracting representation across all specialties. Informal feedback from these to date has been very positive, whereby different specialties feel united as one when they meet at these committee meetings.

While already set up within one hospital site, engagement at Schwartz rounds had previously been poor. Ways to improve uptake have since been trialled, including holding forums for junior and senior colleagues separately. Schwartz rounds have also been implemented in the other two hospitals, with encouragement of both junior and senior doctors to participate within the front panel.

The implementation of the Great-ix is the newest well-being project. While some departments were already running paper-based Great-ix systems, the trainee committee meetings have allowed collaboration to develop an electronic version available to all departments within the health board.

## Conclusion

In conclusion, it is evident that the morale of junior doctors within the workplace is relatively low, with many keen to utilise services to improve wellbeing. Three main projects are currently ongoing, as well as promotion of HHP Wales, with the aim to improve morale and help deliver a culture of positive change for the health board. ■

## Conflicts of interest

None declared.

## References

- 1 Gerada C. How to improve junior doctors’ morale and wellbeing. *BMJ Careers* 2016;352:i1237.
- 2 Health for Health Professionals Wales, 2016. [www.hhpwales.co.uk](http://www.hhpwales.co.uk) [Accessed 26 October 2019].
- 3 Khanom N. *About Schwartz Rounds*. The Point of Care Foundation. [www.pointofcarefoundation.org.uk/our-work/schwartz-rounds/about-schwartz-rounds](http://www.pointofcarefoundation.org.uk/our-work/schwartz-rounds/about-schwartz-rounds) [Accessed 26 October 2019].
- 4 Learning From Excellence. <https://learningfromexcellence.com> [Accessed 26 October 2019].

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